

Please type a plus sign (+) inside this box → 

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**1 P R E** **AUG 12 2002** **U.S. PATENT & TRADEMARK OFFICE**  
**CHANGE OF**  
**CORRESPONDENCE ADDRESS**  
**Application**

Address to:  
 Assistant Commissioner for Patents  
 Washington, D.C. 20231

Application Number	09/871,483
Filing Date	31 May 2001
First Named Inventor	Comeau
Group Art Unit	2122
Examiner Name	AUG 15 2002
Attorney Docket Number	1042US Technology Center 2100

**RECEIVED**7-0-3  
08/23/02  
COPY OF PAPERS  
ORIGINALLY FILED

Please change the Correspondence Address for the above-identified application to:

Customer Number

Type Customer Number here

Place Customer  
Number Bar Code  
Label here**OR**Firm or  
Individual Name*Zucotto Wireless*

Address	16644 West Bernardo Dr. Suite 301				
Address					
City	San Diego	State	Ca	ZIP	92127
Country					
Telephone	858-335-0955	Fax			

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Typed or Printed  
Name **Mark Wardas**

Signature

*Mark Wardas*

Date

*08/15/2002*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.